

CRITERIA FOR PRIOR AUTHORIZATION

Ragwitek® (short ragweed pollen allergen extract)

PROVIDER GROUP Pharmacy
Professional

MANUAL GUIDELINES The following drug requires prior authorization:
Short ragweed pollen allergen extract (Ragwitek)

CRITERIA FOR RAGWITEK: (must meet all of the following)

- Patient must have a diagnosis of short-ragweed pollen-induced allergic rhinitis
- Patient must have a positive skin test or *in vitro* testing for pollen-specific IgE antibodies for short ragweed pollen (*Ambrosia artemisiifolia*)
- Patient must be between the ages of 18 and 65 years old
- The first dose must be given under the supervision of a physician and monitored for at least 30 minutes
- Patient must be prescribed auto-injectable epinephrine
- Treatment must begin at least 12 weeks prior to onset of ragweed pollen season
- Patient must not have a diagnosis of severe, unstable or uncontrolled asthma
- Patient must not have a history of eosinophilic esophagitis

LENGTH OF APPROVAL: 6 MONTHS**Notes:**

- The common ragweed season is between mid-August and October
- Short Ragweed is the allergen *Ambrosia artemisiifolia*